



U.S. Environmental Protection Agency

CLASS I CONTROLLED SUBSTANCE

REPORT:

STRATOSPHERIC OZONE PROTECTION PROGRAM

ESSENTIAL USE HOLDER AND LABORATORY SUPPLIER  
QUARTERLY REPORT (Sec 82.13(s-x))

## SECTION 1 COMPANY IDENTIFICATION

1.1 Date of Submission		1.2 Number of Transactions Reported		1.3 Number of Pages Submitted	
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1.4 Quarter and Year to Which This Report Applies (If 4 <sup>th</sup> quarter is selected, Section 5 of this form should also be submitted.)	<input type="checkbox"/> 1 <sup>st</sup>	<input type="checkbox"/> 2 <sup>nd</sup>	<input type="checkbox"/> 3 <sup>rd</sup>	<input type="checkbox"/> 4 <sup>th</sup>	Year ____
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### 1.5 Company Information

Company Name

Street Address

City	State	Zip Code
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### 1.6 Company Contact Identification

Reporting Company Contact Person	Phone Number	Fax Number
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### 1.7 Signature of Reporting Company Representative

*I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.*

Name \_\_\_\_\_

Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## SEND COMPLETED FORMS TO:

Tracking System Program Manager  
Global Programs Division  
U.S. EPA (6205J)  
1200 Pennsylvania Avenue, NW  
Washington, DC 20460

Information in reports submitted in compliance with the final rule may be claimed as confidential. A company may assert a claim of confidentiality for information submitted by clearly marking that information as confidential. Such information shall be treated in accordance with EPA's procedures for information claimed as confidential at 40 CFR Part 2, Subpart B, and will only be disclosed by the means set forth in the subpart. If no claim of confidentiality accompanies the report when it is received by EPA, it may be made public without further notice to the company (40 CFR 2.203)

Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information. Public reporting burden for this collection of information is estimated to average 16 hours per response. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control numbers for EPA's regulations are listed in 40 CFR Part 9 and 48 CFR Chapter 15. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, OPPE Regulatory Information Division, U.S. Environmental Protection Agency (2137), 1200 Pennsylvania Avenue, NW, Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, 725 17th Street, NW, Washington, DC 20503, Attention: Desk Officer for EPA. Include the EPA ICR number and OMB control number in any correspondence. DO NOT SEND THIS FORM TO THE ABOVE ADDRESS. ONLY SEND COMMENTS TO THESE ADDRESSES.



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## SECTION 2 AMOUNTS RECEIVED FROM PRODUCERS / IMPORTERS

(Reproduce additional sheets as needed)

### 2.1 Company Name

### 2.2 Transaction Summaries

TRANSACTION #

Source Company

Street Address

City

State (U.S.) or Country

Zip Code (U.S.)

Chemical Name of Class I Substance Received

Quantity of Class I Substance Received (kg)

TRANSACTION #

Source Company

Street Address

City

State (U.S.) or Country

Zip Code (U.S.)

Chemical Name of Class I Substance Received

Quantity of Class I Substance Received (kg)

TRANSACTION #

Source Company

Street Address

City

State (U.S.) or Country

Zip Code (U.S.)

Chemical Name of Class I Substance Received

Quantity of Class I Substance Received (kg)



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## SECTION 3 AMOUNTS SUPPLIED TO LABS

(Reproduce additional sheets as needed)

### 3.1 Company Name

### 3.2 Transaction Summaries

TRANSACTION #

Lab Company

Street Address

City

State

Zip Code

Chemical Name of Class I Substance Supplied to Lab

Quantity of Class I Substance Supplied to Lab (kg)

TRANSACTION #

Lab Company

Street Address

City

State

Zip Code

Chemical Name of Class I Substance Supplied to Lab

Quantity of Class I Substance Supplied to Lab (kg)

TRANSACTION #

Lab Company

Street Address

City

State

Zip Code

Chemical Name of Class I Substance Supplied to Lab

Quantity of Class I Substance Supplied to Lab (kg)



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## SECTION 4 DISTRIBUTOR TOTALS

4.1 Company Name

4.2 Company Totals

A	B	C
Chemical Name	Total Quantity of Class I Substance Received (kg)	Total Quantity of Class I Substance Supplied to Labs (kg)
CFC-11		
CFC-12		
CFC-13		
CFC-111		
CFC-112		
CFC-113		
CFC-114		
CFC-115		
Other CFCs (please specify)		
HBFCs (please specify)		
Halons (please specify)		
Carbon Tetrachloride		
Methyl Chloroform		
CBM		



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## SECTION 5 DISTRIBUTOR ANNUAL REPORT

### 5.1 Distributor Name

### 5.2 Company Totals

A	B	C	D	E	F	G	H
Chemical Name	Purchased by Laboratory Customers (kg)	Essential Uses (kg)	In Exported Products (kg)	Destroyed or Recycled (kg)	In Inventory (kg)	Stockpiled (kg)	Marketable Units (MDIs only)
CFC-11							
CFC-12							
CFC-13							
CFC-111							
CFC-112							
CFC-113							
CFC-114							
CFC-115							
Other CFCs (please specify)							
HBFCs (please specify)							
Halons (please specify)							
Carbon Tetrachloride							
Methyl Chloroform							
CBM							